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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/780,725	02/19/2004	Yoji Higashiyama	11-225	3288
23400 7590 07/30/2008 POSZ LAW GROUP, PLC 12040 SOUTH LAKES DRIVE SUITE 101 RESTON, VA 20191				
EXAMINER				
TO, TOAN C				
ART UNIT		PAPER NUMBER		
3616				
MAIL DATE		DELIVERY MODE		
07/30/2008		PAPER		

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary

Application No.

10/780,725

Applicant(s)

HIGASHIYAMA, YOJI

Examiner

Toan C. To

Art Unit

3616

All participants (applicant, applicant's representative, PTO personnel):

(1) Toan C. To.

(3) _____.

(2) Mr. Posz, David.

(4) _____.

Date of Interview: 28 July 2008.

Type: a) ☒ Telephonic b) ☐ Video Conference

c) ☐ Personal (copy given to: 1) ☐ applicant 2) ☐ applicant's representative

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.

If Yes, brief description: _____.

Claim(s) discussed: _____.

Identification of prior art discussed: _____.

Agreement with respect to the claims f) ☐ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: One of the references listed in the IDS (May 3, 2007) was missing examiner's initial, a copy of that IDS with examiner's initial is attached.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

/Toan C To/

Primary Examiner, Art Unit 3616

Examiner's signature, if required

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.